FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION WASHINGTON, D.C. 20549

FORM D

OMB APPROVAL

OMB Number: 3235-0076 Expires: May 31, 2002 Estimated average burden hours

per response. 1.00

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

RECEIVED

SEC USE ONLY Serial DATE DECEIVED

	PARE RECEIVED
Name of Offering ([] check if this is an amendment and name has changed, and indicate change.) Syncline.com, Inc. – Offering of Series C Preferred Stock	
Filing Under (Check box(es) that apply): [] Rule 504 [] Rule 505 [X] Rule 506 [] Section 4(6) Type of Filing: [X] New Filing [] Amendment	[]ULOE
A. BASIC IDENTIFICATION	DATA
1. Enter the information requested about the issuer	
Name of Issuer ([] check if this is an amendment and name has changed, and indicate change.) Syncline.com, Inc.	
Address of Executive Offices (Number and Street, City, State 373 Washington Street, 5th Floor, Boston, MA 02108	Telephone Number (Including Area Code) (617) 986-1000
Address of Principal Business Operations (Number and Street, City, State Operations (if different from Executive Offices)	, Zip Code) Telephone Number (Including Area Code)
Brief Description of Business Build spatial database applications	
Type of Business Organization [X] corporation [] limited partnership, already formed [] other (please specify): Limite [] business trust [] limited partnership, to be formed	PROCESSED JUL 1 8 2002
Month Year Actual or Estimated Date of Incorporation or Organization: [0][3] [0][0] [X]Actual or Estimated Date of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; • FN for other foreign jurisdiction) [D][E]	al []Estimated THOMSON FINANCIAL

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures. Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC. Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicted on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
 - Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	[] Promoter	[] Beneficial Owner	[] Executive Officer	[X] Director [] General and/or Managing Partner
Full Name (Last name first, if in Philip B. Smith.	dividual)				
Business or Residence Address C/o Syncline.com, Inc., 373 Wa		et, City, State, Zip code) Floor, Boston, MA 02108			
Check Box(es) that Apply:	[] Promoter	[X] Beneficial Owner	[] Executive Officer	[X] Director	[] General and/or Managing Partner
Full Name (Last name first, if in Houghton, James	dividual)				
Business or Residence Address C/o The Megunticook Fund II, I		et, City, State, Zip Code) treet, Boston, MA 02116			
Check Box(es) that Apply:	[] Promoter	[X]Beneficial Owner	[] Executive Officer	[] Director	[] General and/or Managing Partner
Full Name (Last name first, if in The Megunticook Fund II, L.P	,				
Business or Residence Address 137 Newbury Street, Boston Ma		eet, City, State, Zip Code)			
Check Box(es) that Apply:	[] Promoter	[X] Beneficial Owner	[] Executive Officer	[] Director	[] General and/or Managing Partner
Full Name (Last name first, if in The Megunticook Side Fund II,					
Business or Residence Address 137 Newbury Street, Boston Ma		eet, City, State, Zip Code)			
Check Box(es) that Apply:	[] Promoter	[] Beneficial Owner	[] Executive Officer	[X] Director	[] General and/or Managing Partner
Full Name (Last name first, if in Lineberger, James	idividual)				
Business or Residence Address C/o Syncline.com, Inc., 373 Wa		eet, City, State, Zip code) Floor, Boston, MA 02108			
Check Box(es) that Apply:	[] Promoter	[] Beneficial Owner	[] Executive Officer	[X] Director	r [] General and/or Managing Partner
Full Name (Last name first, if in Pinna, William P.	ndividual)				
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Business or Residence Address (Number and Street, City, State, Zip Code) C/o Syncline.com, Inc., 373 Washington Street, 5th Floor, Boston, MA 02108

Check Box(es) that Apply:	[] Promoter	[X]Beneficial Owner	[] Executive Officer	[X] Director	[] General
andor					Managing Partner
Full Name (Last name first, if Laurentzen, Matthew	individual)				
Business or Residence Address C/o The Megunticook Fund II,		reet, City, State, Zip Code) Street, Boston, MA 02116			
Check Box(es) that Apply:	[] Promoter	[] Beneficial Owner	[X] Executive Officer	[] Director	[] General and/or Managing Partner
Full Name (Last name first, if Tremblay, Marc R,	individual)				
Business or Residence Address C/o Syncline.com, Inc., 373 W		reet, City, State, Zip Code) n Floor, Boston, MA 02108			
Check Box(es) that Apply:	[] Promoter	[]Beneficial Owner	[X] Executive Officer	[X] Director	[] General and/or Managing Partner
Full Name (Last name first, if Gentile, Matthew M.	individual)				
Business or Residence Address C/o Syncline.com, Inc., 373 W		reet, City, State, Zip Code) n Floor, Boston, MA 02108			
				~	
Check Box(es) that Apply:	[] Promoter	[] Beneficial Owner	[] Executive Officer	[] Director	[] General and/or Managing Partner
Full Name (Last name first, if	individual)				
Business or Residence Address	s (Number and St	reet, City, State, Zip Code)			

						B. IN	FORMAT	ION ABO	UT OFFEI	RING				
			, or does the pendix, Coli				dited inves	tors in this	offering?					Yes No [] [X]
2.	<u> </u>													
3.	Yes No Does the offering permit joint ownership of a single unit? [X] []													
	purchase and/or w	rs in conn ith a state	ection with	sales of sec	urities in th of the broke	e offering. er or dealer.	If a person	to be listed	is an assoc	iated perso	n or agent o	of a broker	or dealer regi	ation for solicitation of stered with the SEC or or dealer, you may
Full N/A	Name (La	ast name f	irst, if indivi	dual)										
Busi	ness or R	esidence /	Address (Nu	mber and S	treet, City,	State, Zip C	Code)							
Nam	e of Asso	ciated Bro	oker or Deal	er										
State	es in Whic	ch Person	Listed Has S											☐ All States
	[AL] (IL) [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]	L All States
Full	Name (L	ast name i	first, if indiv	idual)										
Busi	iness or R	esidence .	Address (Nu	mber and S	treet, City,	State, Zip (Code)							
Nam	ne of Asso	ociated Br	oker or Deal	er										
State	States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)													
	[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]	- All states

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

•	if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\sigma\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$0	\$
	Equity	\$0	\$
	[] Common [] Preferred Convertible Securities (including warrants)	\$ 1.066.669	\$ <u>1.066,669</u>
	Partnership Interests Other (Specify) Limited liability company interests	\$ <u> </u>	\$ \$
	Answer also in Appendix, Column 3, if filing under ULOE.	\$ 1,066.669	\$ <u>1.066.669</u>
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	4	\$ <u>1,0669.669</u>
	Non-accredited Investors	0	\$ 0 _
	Total(for filings under Rule 504 only)		\$
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.	Type of	Dollar Amount
	Type of offering	Security	Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
Tra	ansfer Agent's Fees		[X]\$ <u>0</u>
Prir	inting and Engraving Costs		[X]\$ <u>0</u>
Leg	gal Fees		[X]\$ <u>70,000</u>
Acc	ecounting Fees		[X]\$ <u>0</u>
Eng	igineering Fees		[X] \$ <u>0</u>

•			
Sale Commissions (specify finders' fee separately)			[X]\$
Other Expenses (investment banking and appraisal fees) Tra-	vel and Miscellaneous		[X]\$ <u> </u>
Total			[X]\$ <u>70,000</u>
 Indicate below the amount of the adjusted gross proceed purposes shown. If the amount for any purpose is not k estimate. The total of the payments listed must equal th 		\$996,669	
to Part C - Question 4.b above.		Payments to Officers, Director s, & Affiliates	Payments To Others
Salaries and fees		[]\$ <u>N/A</u>	[] \$ <u>N/A</u>
Purchase of real estate		_ [] \$ <u>N/A</u>	[] \$ <u>N/A</u>
Purchase, rental or leasing and installation of ma	[] \$ <u>N/A</u>	[] \$ <u>N/A</u>	
Construction or leasing of plant buildings and fa	[] \$ <u>N/A</u>	[] \$ <u>N/A</u>	
	ue of securities involved in this offering that may be used in ssuer pursuant to a merger)	[] \$ <u>N/A</u>	[] \$ <u>N/A</u>
Repayment of indebtedness		[] \$ <u>N/A</u>	[] \$ <u>N/A</u>
Working capital		[]\$0	[] \$_996,669
Other (specify):	-	[] \$ <u>N/A</u>	[] \$ <u>N/A</u>
Column Totals		_ [] \$ <u>N/A</u>	[] \$ <u>N/A</u>
Total Payments Listed (column tot	tals added)	[] \$996,669	[] \$_996,669
	D. FEDERAL SIGNATURE		
	undersigned duly authorized person. If this notice is filed under and Exchange Commission, upon written request of its staff, the le 502.		
Issuer (Print or Type) Syncline.com, Inc.	Signature	Date June 5	, 2002
Name of Signer (Print or Type) Marc R. Tremblay	Title of Signer (Print or Type) President and CEO		

ATTENTION
Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)